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APPARENT INTRA-UTERINE AMPUTATION.

DR. LUDWIG MELICHER, in the *Oesterreichische Medicinische Wochenschrift* for April, 1848, relates the following very interesting case:—Joseph G——, 12 years of age, a pupil in the Imperial Grammar School, born of healthy parents, was the fourth child, and one of seven brothers and sisters, all born healthy, and well made. His mother states that she suffered no accident of any kind during her pregnancy with this child. He had always been healthy, with the exception of an attack of typhus three years ago. He is well formed for his age, his limbs of average proportions, except the left upper extremity, which presents the following unusual appearance—viz., a congenital entire deficiency of the lower two thirds of the left fore-arm and hand. It appears at first sight as if amputation had been performed, but that such is not the case is evident from the presence of five little rounded elevations on the end of the stump, representing the fingers; one of them the size of a small pea, and furnished with a rudimentary nail, was separated from the others by a deep line, and corresponded to the thumb; the rudimentary fingers are about the size of hemp-seeds; they are soft, and contain neither cartilage nor bone. When the stump is bent, they become very distinct. On the internal and on the external borders of the stump, close to those elevations, are two funnel-shaped depressions. The stump itself has the appearance of a nine-pin flattened, its base at the elbow-joint measuring two inches; its apex is one inch and a half in width; its length is two inches and three quarters. It is soft and spongy to the touch, as if padded with fat, and, on closely examining it, two bones may be distinctly felt; one corresponding to the radius, the other to the ulna. The elbow-joint is normal. The internal and external condyle, and also the olecranon, can be distinguished. Flexion and extension of the stump of the fore-arm are perfect, but pro- and supination cannot be freely performed.

Through the unnatural mobility of the shoulder-joint circumduction of the flexed or extended stump is rapidly performed, and by these means he is enabled to assist himself, and perform therewith the most varied actions—e. g., he can by its employment, withdraw the bolt of a door and open it; he inserts the flexed stump into the handle of a basket, and readily moves it. The stump possesses in this manner considerable strength, so that he can drag along heavy weights. In cutting paper he

holds it down with the bent stump, while he cuts it with the knife held in the hand of the other arm. He holds the paper in a similar way while writing; he can tie a knot, put on his cravat, and dress himself without any other assistance. He can even mend a pen without difficulty, holding the feather end in the bend of the elbow, and cutting the quill with the hand. He further aids the stump by the use of the shoulder-joint and knee. Thus he in many ways compensates for this unfortunate deficiency.

Dr. Melicher very justly regards the preceding deformity as an arrest of development, and as confirmatory of the theory of the centrifugal growth of parts. He refers to the reports of similar deformities by various authors, accompanied with defects of other limbs or organs; and he gives, with engravings of the preceding case, a drawing of a case which he saw in Vienna, where the fore-arm was replaced by three fingers. The child died at the age of three months, of hydrocephalus acutus. On examination of the arm, it was found that the biceps was divided at the elbow into three strips, which moved the fingers anteriorly; posteriorly they were moved by prolongations of the triceps.

A reference to the recorded observations of authors leads Dr. Melicher to divide cases of intra-uterine amputation into (1) the real, and (2) the apparent.

1. The cases of *real* intra-uterine amputation may again be divided into perfect and imperfect. Perfect intra-uterine amputation has been traced either to entanglement of the limbs with the umbilical cord, or to inflammation and sphacelus of the limb or limbs. Imperfect amputation may arise from a similar entanglement of the cord, cutting into, but not dividing the member; and under these circumstances inflammation may be set up, producing deformity, or ending in spontaneous amputation, as in those rare instances where the amputated limbs or parts of limbs have been expelled detached from the trunk.

2. *Apparent* intra-uterine amputation belongs to that class of malformations which consist in the arrest of the growth of a portion of the organism, while the remainder proceeds in its normal development. Such is the nature of the preceding and a few other analogous cases which have been put on record.

Dr. Melicher has brought together most of the names of the authors who have recorded these cases. We add the following, which we find recorded in the Medical Times of Nov. 19th, 1842, by Mr. W. B. Kesteven, under the title of "Effect of Maternal Imagination on the Fœtus." It has escaped the notice of Dr. Melicher, most probably from the objectionable heading under which it was recorded; as it appears to us objectionable, from its assuming, as an explanation of the cases, a theory which is regarded by physiologists generally as destitute of foundation. Dr. Melicher's title, "Apparent Intra-uterine Amputation," at once points out the characteristic features of the deformity, and avoids any inference of theoretical causes.

"An infant presented on the left upper extremity, a mere stump of about two inches in length, beyond the elbow-joint, terminated by a puckering of the integuments on which were situated five minute bodies

resembling the tips of very small fingers; the child was otherwise perfectly formed. The history of the case is as follows:—

“Eight months before the birth of the child, the mother, walking with her sister (from whom I have collected the particulars), met with a beggar who, in order to excite compassion, exhibited an amputated stump on his left arm. The woman immediately expressed a sense of disgust and horror, and observed that, if she had been then pregnant, she should expect that her child would be born similarly maimed. The sequel has proved that she was then pregnant, though she did not apprehend it, and that the fears of the result were too well grounded.

“Her sister was present at the labor; and on receiving the infant, and discovering its deformity, experienced a thrill of disgust and sorrow, from which she did not recover until a few days after, when I was called to attend her for abortion, she not having previously suspected that she was pregnant.

“A few days ago I was called to attend, in her second labor, an intelligent, respectable young woman, the wife of a plumber residing in Hornsey Road, opposite to the first-mentioned woman. The child, which is otherwise perfect, presents a deformity precisely resembling that aboved described, with the exception of two imitations of finger ends instead of five, as in the former instance. I have collected the history of this case from the sister-in-law, the husband and herself. About eight months since, she was subjected to exactly the same circumstances as those I have related in the other case; she also did not suppose herself to be then pregnant, but expressed the same extreme sense of aversion, and her fear that ‘if she had been *in the family way*’ the infant would be similarly maimed.

“In both these instances the same dread of the result had been expressed during the period of gestation; and I have reason to think, though of course I cannot prove it to my satisfaction, that the same individual vagrant was the cause of alarm to each.”

The subject of this case is, we understand, alive, and is a most intelligent and active lad, making as much use of his stump as the boy mentioned by Dr. Melicher.

The more extended researches of Dr. Melicher, with more correct views of medical reasoning, while they lead to a collection of facts, supply at the same time the grounds of a more rational explanation, than is furnished by popular ignorance. It is only thus by the accumulation and comparison of carefully-recorded observations, that pathological morphology will be enabled to explain the hitherto complicated and seemingly-mysterious occurrence of monstrosities. This branch of medical science will by such researches be removed from the realms of imagination, and take its place under the rule of sober facts and severe reasoning. It is here worthy of notice how one false assumption or hasty generalization leads to other erroneous conclusions. It has been by many writers on teratology laid down as an ascertained truth, that such malformations as are noticed in the preceding extracts can only occur in the early weeks of pregnancy, and that they may be the effects of emotions in the maternal mind. The explanation which further experience affords, that

these deformities are to be attributed to pressure by the cord, disproves the first conclusion, for the cord may become, and is necessarily more likely to become, twisted round the limbs at a later period when they are formed, than at an early period when they are but rudimentary; and to the second conclusion, facts lend but a doubtful support.—*Med. Gazette.*

ON THE ALLEGED ANTAGONISM OF AGUE AND PHTHISIS.

BY RICHARD HODGES, ESQ., M.R.C.S., ROCHFORD, ESSEX.

THE assertion that ague antagonizes phthisis, appears from observation to be incorrect, or, at all events, the antagonism does not exist to the extent that many would have us believe; for, in numberless instances, I have witnessed the development of consumption in those who were suffering from ague, and *vice versa*.

This neighborhood has the credit of being an aguish one, and therefore I have the opportunity of observation. We have seen, however, ague in all parts of this country, and occasionally extensively and severely, from which one might infer that this locality is not deserving of the name ordinarily given to it. Hundreds of persons live and die here without practically knowing what the disease is, and many even consider that slight attacks of it dispose one to longevity. If it be true that intermittent fever be continually more or less prevalent in this part of Essex, it is no less true than that phthisis abounds here to an extent at least equal to that in any other locality. It may scarcely be necessary to bring forward cases illustrating the truth of the assertion that the two diseases prevail in the same neighborhood, or that a patient may at one and the same time be the subject of both consumption and ague. Within the last year the three following cases have fallen under my notice: A young lady, aged 17, suffered from intermittent fever, who in a short time after died of decline.—A married woman, aged 29, had, about a year and a half ago, an attack of remittent fever, and then, at intervals, ague of the tertian form. In March last I again visited her, on account of a chest affection, which proved to be phthisis, and she died in April.—Another young person, 36 years of age, who frequently lived in Wal-lasea Island (a place favorable to the development of ague and aguish diseases), suffered from an attack of remittent fever, and subsequently became the subject of a tertian intermittent; latterly, disease of the left lung manifested itself, and she is now dying of true tubercular consumption. Whether the aguish poison delayed the appearance of the pulmonary symptoms, or hastened it, I know not; it may have debilitated the system, and placed her constitution in circumstances favorable to the production of the disease, and it is not improbable that if there had been no ague, consumption would not have appeared so speedily.

We all know that there are such affections as aguish apoplexy. I am now in attendance upon a person at Leigh in this neighborhood, who has had a severe disorder of this sort, and intermittent neuralgia, and why should there not be an aguish bronchitis? I believe that there is such a disease, and it is more than probable that this malady—ague bron-

chitis—may have been mistaken for phthisis, and the ague, or its cause, obtained the credit of being an antagonist to what was supposed to be consumption; whereas, in reality, the pulmonary symptoms might have been, or were, the result of the cause of ague, and *bona fide* of like origin with it.

It has not been my wish, Sir, in transmitting this communication to you, to differ from those eminent men who have advocated the doctrine that ague and phthisis are opposed to each other, but to caution those who have been educated to believe in the antagonism, not to pronounce a person with ague to be free from phthisis, or assert that because a person labors under intermittent fever he never will die of consumption.—*London Lancet.*

DEATH FROM A DROP OF LAUDANUM.

BY H. V. WOOTEN, M.D., LOWMEDESBORO', ALA.

A *FINE*, healthy, female child, in the fifth day of its age, suffered from "griping," as its mother supposed, for which she administered to it *one drop* of laudanum. Thirty minutes afterwards, its breathing becoming slow and stertorous, I was sent for; but being absent, another physician saw it, who found it impossible to get the child to swallow anything. External excitants, &c., were resorted to, and three hours after the laudanum was taken I saw it. Its pupils were dilated and insensible to light, breathing very laborious, each inspiration giving a loud struggling sound, great lividity of complexion, &c. It would draw four inspirations, at the rate of sixteen per minute, and then cease to inhale about thirty seconds, when the four inspirations would again be drawn. On the fourth inspiration, a general spasm of the extremities would seize it. Its pulse during the last two inspirations were about fifty to the minute, during the spasm and suspension of breathing it would run up to about 100, become very weak, and finally cease at the wrists about six seconds before the breathing was resumed.

This condition continued without material variation until the sixth hour, when on bathing it in hot water and brandy, followed by the application of plasters of cayenne to the feet and hands, it breathed continuously, but with great difficulty, at the rate of 30 inspirations to the minute, for twenty minutes, and its pulse during all this time ranged from 90 to 100. Its pupils contracted a little, and the lividity of complexion disappeared to a considerable extent. Hopes were now entertained that it had passed the crisis, and would recover; but spasms again seized it, from which it fell into a collapse, from which nothing that we could do would raise it. After this it would draw only three inspirations at the rate of twelve to the minute, when spasms would occur, and the suspensions of breathing become longer. At the tenth hour, it drew but two inspirations together about twelve seconds apart, and then suspend for nearly a minute. For three hours, I thought during every suspension of breathing, that it was dead, as its pulse would cease at the

wrists before breathing was resumed ; but it continued to labor for breath in this way until the end of the eleventh hour, when it died.

The laudanum was dropped from an ounce vial, in which there was but about ten drops. It had been stopped with a piece of twisted paper, and hanging up about a year ; all the inner surface of the lower part of the vial was encrusted with opium, and the remaining laudanum was heavily charged with this deposit resulting from evaporation. Every means of keeping the child alive which our ingenuity could suggest, were diligently applied, and with apparent effect, but not success.

This case is one which rarely occurs, and I report it mainly on that account ; yet it is not otherwise destitute of interest. The stomach pump was not used, because I had no tube of suitable size, and besides, I was satisfied that it was too late to resort to measures of that kind when I saw it.—*Southern Med. and Surg. Journal.*

TREATMENT OF CHOLERA AT THE CHARITY HOSPITAL, PARIS.

THE situation and internal arrangements of this hospital are more healthy than those of the Hotel Dieu, and its inmates are mostly from a better class of the community. The medical treatment also presents more diversity.

M. FOUQUIER, and M. OULMONT. M. Oulmont was the first to introduce the saline treatment into the Parisian Hospitals ; and he employs this method in all cases of cholera, admitting, as an aid, only the external means of restoring warmth. His prescriptions uniformly are: common salt, 15 grammes ; gum-mixture, 120 grammes ; to be taken every quarter of an hour in spoonfuls ; and two or three enemata during the day, containing 15 grammes of salt with a sufficient quantity of water. This treatment has not, as M. Oulmont himself confesses, entirely answered the expectations formed regarding it. M. Fouquier does not seem to have adopted any exclusive mode of treatment, but to have generally given emetics of ipecacuanha, in doses of two grammes, with diffusible stimulants, and opiate injections.

M. RAYER abstains from all experiments, and employs the same treatment as he adopted in 1832. He considers the digestive organs as the chief seat of the disease, and prescribes, in all cases, either 10 centigrammes of opium in pills, during the day ; or a mixture, with from 6 to 12 drops of laudanum, and three or four injections, each containing 12 drops of laudanum ; cupping to the epigastric or umbilical regions several days in succession, or even several times in the same day ; venesection from the arm, when possible ; iced Seltzer water for common drink. In several cases complicated with delirium, he has opened the temporal artery, but without success.

M. CRUVEILHIER employs a very active and various treatment. Most commonly, he administers at first hot aromatic infusions with ether ; then a combination of astringents and narcotics, with some such mixture as the following : peppermint water, 120 grammes ; extract of catechu, 1 gramme ; laudanum, 20 drops. For diarrhœa, he employs enemata

containing from 15 to 20 drops of laudanum; and if there be local abdominal or thoracic pains, he has recourse to repeated local bleedings, until the pain have ceased. A succession of sinapisms to the limbs, and friction with a stimulating liniment, complete in general his treatment of the algide stage. In some very severe cases, almost *foudroyants*, he administers every half-hour a spoonful of the following mixture: laudanum, 3 grammes; ammonia, 5 grammes; ether, 15 grammes. The treatment in the intervals consists of draughts of hot water, sweetened with gum syrup; sinapisms to surround the limbs; a large sinapism to the abdomen, and a blister to the chest or vertebral column. M. Cruveilhier has tried the *stachys*, but without any sensible result, which may be ascribed to his having combined it with opium and other remedies.

M. BOUILLAUD generally adapts the saline treatment, and gives daily 15 grammes of salt in mixture, and two enemata, each containing 15 grammes of salt. The only additional means which he uses are ice and Seltzer water, and sinapisms to restore warmth. He rarely uses the hot air bath, and only when algidity is obstinate. More rarely, M. Bouillaud uses opiate enemata, with ice and Seltzer water, sinapisms and stimulating liniments. He is entirely opposed to general or local bleeding, even in the stage of reaction.

M. BRIQUET. All the efforts of M. Briquet are directed to the promotion of reaction, at the same time that he employs opiates for the evacuations and pains. His treatment at first consisted of the hot air bath, infusion of mint, or punch, frictions with ammonia, and sinapisms to the limbs. He has since adopted a more active method, consisting of the alternate administration of ice and hot aromatic and stimulant drinks, and alternate frictions with pounded ice and with alcoholic and ammoniacal liniments every half hour. The other indications are fulfilled by pills of thebaic extract, mixtures with acetate of morphia, enemata of starch and laudanum (6 to 12 drops), Seltzer water, etc. In some cases he has given emetics of ipecacuanha, in doses of 1 or 2 grammes. The comparative result of his treatment is not known.

M. PIDOUX has not confined himself to any one method, but has employed a varied treatment. At first he prescribed, in the algide stage, diffusible stimulants with narcotics, as tea, hot infusions of lime or mint with syrup of ether and of opium, a succession of sinapisms to the limbs, etc.; ice and Seltzer water, when reaction had commenced. More recently, he employed opium in large doses, in mixture and injections; but was soon led to renounce its use, from its appearing to produce severe cerebral disturbance. Saline injections have also been tried and abandoned. M. Pidoux employed electro-galvanism in some cases, with the effect of relieving some of the more distressing nervous symptoms, as cramp, hiccup, vomiting, etc.; but he has not repeated this remedy. He has also tried the terchloride of carbon, but without sensible effect. At present, he is making experiments on the utility of trisnitrate of bismuth in diarrhoea.

SOME EXPERIMENTS AND OBSERVATIONS UPON TENDRILS AND VINES,

EVINCING A PRINCIPLE OF ATTRACTION WHICH GOVERNS THE DIRECTION AND INNATE MOTIONS OF PLANTS AND TREES DURING THEIR GROWTH.

[Communicated for the Boston Medical and Surgical Journal.]

THE vines selected were those of the bell-neck squash. Observing a number of tendrils on a large, thrifty vine by the side of a stone-wall, pointing to some stems of high golden-rod and buckthorn branches, the stems and branches were cut away and others bent so that the tendrils most turn to nearly a right angle in order to curl around them. In twenty-four hours, the tendrils had all changed their direction, and most of them performed several gyrations around the stems and branches. Observing several tendrils pointing to stones in the adjacent wall, as if attracted there, a slate pencil was placed in contact with one of them, around which it soon coiled itself. Several nails were placed in contact with others, but owing, as was supposed, to their sharp corners, did not attract the tendrils. Dry stems invited the tendrils, but it was thought not quite so well as the green.

On a warm, rainy morning, a green leaf of the buckthorn, with the surface outward, was rolled up, and gently placed in contact with a long, straight tendril, and in fifteen minutes it had taken one turn around the leaf. This experiment was repeated eight or ten times, on other tendrils, with nearly the same result, the time varying not more than an hour. From two of the tendrils, the leaves were removed, and within an hour or two the tendrils straightened again, and appeared to be attracted to the bush to which they had previously pointed. The next morning they were found entwined around the branches to which they had pointed the night before. Some of the leaves were held in the hand, and the motion of the tendrils around them must have been as fast as the minute hand of a watch, though in other instances it was slower. The property of curling was much more manifest in some states or stages of growth of the tendril than in others. It appears to be most active when the tendril has nearly attained its full growth. When tendrils meet with nothing to clasp, they twist around themselves, and after this they seem to lose their affinity for other bodies, as they did not uncurl when other bodies were placed in contact with them.

The closeness with which tendrils embrace stems and reeds, and the tenacity with which they hold on without the aid of much if any glutinous matter, evinces as strong a degree of attraction for other bodies as the experiments related. On an examination of vines, tendrils may be found twisted on stems and reeds, in directions entirely contrary to those in which they grow from the stems of the vine.

A wonderful manifestation of an attractive property may be seen in the ivy, where the tendrils penetrate into the bark of trees, and the vines often grow under it so as to be lost sight of for some distance up the tree. In this instance botanists have said that the tendrils answer instead of roots for sustenance, but experiment proves the assertion erroneous. In thirteen different instances, ivy vines, growing upon white oak trees,

were severed ~~or cut~~ cutting out sections, and leaving long stems above to grow or sustain themselves, if they would, by their tendrils; but in every case the vine died in an unusually short time—much quicker than mown grass. The leaves wilted in half a day. The same was the case with cucumber, squash, grape and bean vines. The close attachment of ivy vines to trees and other vines, for the earth and other bodies, must, therefore, be ascribed wholly to a property of attraction which they have for bodies which will support them mechanically.

Vines possess this relative affinity or fellowship for other bodies as well as tendrils. This is abundantly manifest in the bean, grape, ivy, cucumber, and many other vines. Within what distances the principle operates, and with what force, is yet to be ascertained; but that such a property exists in living vegetables, there is as much evidence as of the force of gravitation.

In the material world, we have already discovered several different species of attraction between bodies—capillary attraction, chemical attraction, attraction of gravitation, and cohesive, and magnetic attractions. Of their peculiar nature we know nothing. Their effects compose all our knowledge of them. There can be no surprise, therefore, in meeting with still another species of material affinity of a different nature.

We have given only one illustration of this undefined species of affinity. The vegetable world is full of it. It is to the vegetable world what the power of gravitation is to matter in general. It is the great antagonist power to it, in every plant, tree, and blade of grass. When a young plant or herb first sprouts from the side of an old, exposed cellar wall, or walled up bank, the direction of it is perpendicular to the side of the wall or bank. But it never grows in this direction. It makes a right angle, or nearly one, and points to the zenith. The attraction of gravitation draws the plant or herb downward, and were there no other opposing force would bring the top to the ground; but the affinity which the leaves, flowers and stems have for the heat and light of the sun, overcomes the force of gravity or weight of the plant, and attracts it into the most favorable direction to receive the stimulus essential to its existence. The growth of the plant, acting alone, would send it in a direction straight from the wall or bank. The tree which grows upon the steep hill-side does not point in a direction perpendicular to the plane on which it grows, as its roots would seem to prompt it, but to the zenith whence comes the genial rays of the sun, obeying that impulsive affinity which it has for light, heat and air. If trees are prostrated by the wind or bent down by force, and life remains, all the new shoots grow in a direction perpendicular to the plane of the earth, or as nearly so as the attractions of cohesion and gravitation will allow. In trees already wooded and plants hardened and stiffened by growth and age, the affinity for light and heat is overcome. It is in the green, infantile, flexible state of the plant that the direction is determined by its affinity for heat and light. The leaves seem to perform the chief agency in the direction of plants. Their surfaces are ever drawn upward. Look at the grape vine, or the greenbriar, where the vine in one place hangs down, and in others ascends, and you will see the leaves completely change their direction.

The roots of trees are endowed with a like affinity for earth, water and nutriment. They secure plants and trees in the direction given them by the tops and leaves. This principle should be denominated **THE ATTRACTION OF SENSATION, OR SENSITIVE ATTRACTION.** It is visible in the stamens and pistils, in the calyxes and corollas. Overcome by gravity, it allows the head of the lily to droop, and causes the rose to look upward. It directs the vine in its gyrations around the pole or tree, and determines the tall oak to aspire to the zenith.

This warm aspiration in plants for substances without them, partakes somewhat of living animal matter, while it holds an equal kindred with the inorganic world. It is not intelligence. It may be a species or semblance of sensation in unity with a species of chemical or physical attraction. Sensation is not intelligence, but only an element or condition of it. The nature of the property or attribute is not material, its effects only are necessary to be known.

Between the germs and pollen of plants the manifestation of this principle is truly wonderful. The pistils of white and tiger lilies are an inch or two inches in length, and the pollen is attracted through this capillary vessel to the germ. The pistillate organs of Indian corn are twelve and often eighteen inches in length. The pollen is drawn through the whole length of these silky vessels. The principle is as clearly demonstrated in living vegetables as the law of gravitation in falling bodies.

Tendrils and vines embrace and hug the staves they need for support. Only strew the seeds of plants and trees upon the naked earth, and roots dive into the maternal bed and creep in various and opposite directions in quest of sustenance, and fresh footholds to support the stems. The surfaces of leaves twist and turn to the sun's rays, the better to drink in the fiery element which they want for their functional use. The flower-cup and the flower cover imperviously the pistils and stamens in their nascent state, but as soon as the organs of renewal are matured, the sepals and petals are attracted away, or inverted, by a superior affinity for the sun's rays. The quiescent germ expands into fruit, which sucks the rich juice from the maternal veins, and fattens on the element to which it holds an inborn affinity. The sap itself, obedient to the same law, traverses the capillary vessels of the tallest trees, and descends in a new form to harden into wood. There can be no impropriety, therefore, in defining the principle, *the attraction of sensation, or sensitive attraction.*

D. B. SLACK.

Providence, Sept. 7th, 1849.

PARALLEL PASSAGES ON THE FUNGOUS THEORY OF EPIDEMICS.

[Communicated for the Boston Medical and Surgical Journal.]

ON the 5th September, 1845, there appeared an article in this Journal on the fungous origin of fever, by W. C. Wallace, M.D., of New York. The same views were published in 1846 in the report of the committee appointed by the Legislature of New York to investigate the Quarantine Laws.

In the recent work on the Cryptogamous Origin of Malarious and Epidemic Fevers, by Professor J. K. Mitchell, of Philadelphia, opinions are expressed as novel, but which are similar to those published four years ago, and supported by the same arguments. By both, the products of dead animal or vegetable matter are shown to be insufficient to produce specific epidemics, unaided by the chemistry of life; as the same decompositions would, in the same circumstances, yield similar products, and always generate one disease. By both, the spores of fungi are supposed to be mechanically diffused through the atmosphere, and to produce diseases varying with the nature of the plants which give them birth—causing intermittents when indigenous, and yellow fever or cholera when imported from abroad. Both arrive at the same conclusion with respect to quarantine, and both quote the laws of Moses.

The following specimens show a remarkable similarity of thought and expression.

Wallace, 1845.

Page 132. According to the theories advanced, most febrile diseases are of two kinds. The one is occasioned by irritation from the reception of poison from parasites away from the body; the other by irritation from parasites in the skin. The one is propagated on bodies exterior to the person, the other is propagated upon it.

Page 130. The powder diffused in the air, on opening the common puff-ball, is said to be myriads of its seed, which wafted by the atmosphere may pass to great distances. Many of these will alight on barren soil, or at least on places unfavorable for their growth, while others, out of the abundance diffused, will find locations that will yield them support, and where they may propagate their seed, to be again in like manner dispersed by the wind to seek new habitations.

Page 131. As plants have their peculiar locations, and do not survive the seasons of other latitudes, imported parasites may be propagated on whatever serves as a soil for mouldiness, till they are blighted by the appearance of frost. The poison of yellow fever gradually extends from the part where it was first introduced, or to use the language of the contagionists creeps from spot to spot, and increases the extent of the infect-

Mitchell, 1849.

Page 32. The germs of contagious diseases are reproduced *in* the body, the germs productive of malarious and other non-contagious diseases are elaborated and re-elaborated *out of* the body, and independently of its agency. One is the product of person, the other of place.

Page 100. A wind may indeed waft the spores in small quantity to a distance, but unless there are the conditions essential to an adequate reproduction, the spores must lie dormant and harmless.

Page 110. Such germs may be carried by men, and goods, and ships, or may make a slower progress by their own unaided activity, or be scattered by the winds, to regeminate, wherever special conditions are found.

Page 106. A tropical fungus, carried off in dark, damp, animalized holds of ships, or in the offensive clothes of sick or dead seamen, may be introduced into the summer clime of unaccustomed places, and there, as it came from, may go to, the shore, and be sometimes reproductive. May I not suppose that the germs, when once a-shore, may slowly migrate landwards, and even by chance be carried or wafted to other neighboring

Wallace, 1845.

ed district. On the other hand the poison of typhus, one of the exanthemata, does not survive the heat of a tropical region.

Page 131. In 1817, Savannah, as I am informed by a gentleman who formerly resided there, was as healthy as southern cities usually are, until the rice on a large plantation near it was cut. For some time before this, the prevailing wind was the *south west*. Several days after the cutting of the rice, the wind changed to the north east, or from the rice field towards the city, and in a few days the yellow fever prevailed to an alarming extent.

Page 132. I have been informed by a medical friend whose father made the observation, that those who slept under musquito netting escaped the disease, and hence concluded that the insects were useful in enforcing its adoption. The poisonous seeds being intercepted by the netting, leave the atmosphere within it comparatively pure.

Page 132. It is possible that by falling on the *aqueous vesicles* constituting mist, the dust of malaria may be inhaled in a more concentrated form by exposure after sun-set.

Mitchell, 1849.

spots, where they may grow, and create new foci of disease? that the requirement of an exotic may make such visitations rare, and such dispersions unusual? and that equatorial plants may be nipped, and even totally destroyed by an unaccustomed frost?

Page 100. During some unusually sickly years, when scarcely an inhabitant of the skirts of the city escaped marsh fever, the wind set, often for a long period, directly from the infected regions into the heart of the city. In perhaps half a minute from the time when the *south-western* air left the meadows and pestilential borders of the town, it had crept into every chamber of the place.

Page 100. A gauze veil, or a gauze screen in a window, adds much to the security of the wearer, or the occupant of a chamber, in even the most unsound places. We can scarcely see how any gas or vapor, simple or compound, could be arrested by such a defence; but it is easy to suppose the detention of organized and comparatively bulky bodies, electrical and glutinous, or moist.

Page 56. If they have, as Hensinger alleges, a polarizing membrane, and consequently electrical relations to the polarized *vesicles* of a marsh mist, that mist, imbued with *moisture*, enriched by the terrestrial exhalations, and screened by the shadows of night, may form the most fruitful floating soil for the invisible cells of microscopic cryptogami.

TEMPERATURE OF THE BODY.

Extracted from a manuscript work by ENOS STEVENS, Examining Agent for the Massachusetts Commissioners for the Prevention and Cure of Idiocy.]

WHEN digestion and the circulation and oxygenation of the blood go on properly, the blood at the heart and lungs is always maintained

at the normal temperature of 98 degrees; and by its circulation through all parts of the body, it secures nearly that temperature in every limb, even in cold weather. While the limbs are laboring, the expended nervous stimulus becomes heat, like the electro-magnetic fluid, or the worked-off steam of an engine, and thereby renders the laboring limbs quite as warm as the heart or brain. When the temperature of any or all parts of the system becomes nearly 98 degrees, the excess of the heat rapidly escapes in perspiration or sweat through the skin, or in the breath through the lungs, or is radiated off into the air or surrounding objects.

Yet if we are very long and continuously exposed to cold, and our limbs are cooled down too far below the normal temperature, then the nervous stimulus of all other parts of the system is borrowed to help maintain the living temperature, until we can extricate ourselves from so severe an exposure. The cold contracts the pores of the skin, and condenses and retains the perspiration, which clogs them up and prevents the superficial arterialization of the blood, while it is circulating near the air on the skin. As this waste of heat or stimulus goes on, voluntary motion becomes weak and irksome; digestion, breathing, and the circulation of the blood are weakened, and a general torpor comes over the whole system. Either the life of the person thus exposed must soon become extinct, or else he must re-organize his various members with reference to such a mode of life. If the trunk of the body is partially protected, and his stomach is excited by warm and stimulating foods and drinks, the digestion may possibly go on, even although the voluntary muscular and mental powers are so robbed of their stimulus as to be almost torpid.

In Concord, a man about 50 years old was found in a rudely-boarded room, in a barn, who would on no account allow himself to be clothed, or to be warmed by artificial heat; yet his limbs were always very warm, even in the coldest winter weather. He had been thus confined more than thirty years. In childhood and youth, he was a very wayward simpleton, and became a fool at 8 or 10 years of age, by gluttony and amative abuses, and by long and frequent exposures to cold while he wandered off from home. For the last twenty years he has been mildly treated, often washed, had his room cleaned out, and has been regularly visited and fed four times every day. His head is large and well shaped, his body is tolerably well formed, and he seems to have a faint trace of several mental faculties, and the use of all his limbs. But he is so exclusive a genius on maintaining his temperature in the cold, that his whole constitution is robbed of nervous stimulus, and nearly torpid or foolish in every respect that is directly under voluntary control.

Similar cases are often met with in all parts of the country, in which simple or crazy persons wander about, neglecting or throwing off their clothing even in winter; and yet their limbs are always as warm as those of the brutes.

Many persons often waste much of their nervous stimulus by cold, through thin or wet clothing, or by reclining against cold walls. Children frequently attend school and sit all day where they are not comfortably warm, and then their brains are as unsuccessful in thinking and

treasuring up knowledge, as their limbs are clumsy, because neither their brains nor their muscles have stimulus enough in the cold to carry on their operations properly. In the same manner many persons in the spring and fall attend church thinly clad, and there shiver and wonder why they remember so little of the sermon. Their systems are then so reduced by cold, that the external senses, and the organs of the brain, act on each other with so little energy and strength, that they cannot make lasting impressions on their memories. Others go out of warm rooms and ride a great distance in the cold with insufficient clothing, and thus take cold and become sick with a fever, or cough, &c. Others, again, allow their clothes to be wet, and to remain so several hours, in cold weather, conducting off and wasting their vital heat, and leaving them sick and rheumatic for many days.

Whenever one is not comfortably warm and dry, he is wasting nervous stimulus, and his mental and physical operations will be proportionably weakened and pained on account of it. When the surface of the body becomes too cool, and the pores of the skin have contracted, then perspiration is condensed before it has escaped, and is retained and gradually clogs up the pores and consolidates in them. But when one becomes warm again, and his system has become full of heat and stimulus, then the matter that ought to have been perspired out is thrust out of the system through its weakest places. If it mainly escapes through the liver, he is bilious, like those who take violent colds by exposures after hard labor in September evenings. But if it mainly escapes through the lungs, then a violent cough ejects it in phlegm or a thick loathsome breath; if from the alvine glands, the diarrhoea; if from the kidneys, the diabetes; but if it affects principally the main body of the muscles, he suffers the rheumatism, until his system has been repaired and restored to its normal operation.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON. SEPTEMBER 19, 1849.

Death of Medical Men.—The catalogue of eminently useful medical men who have died the present season in the United States, is truly a melancholy one. Among the most recent names, those of Dr. Harrison, of Cincinnati, and Dr. Brigham, of the Asylum for the Insane at Utica, N. Y., are prominent, from the large space they filled in the public estimation. Prof. Barbour, of St. Louis, Mo., has already been alluded to in the Journal, as one of the victims of cholera in that afflicted city. More recently we learn the death of Prof. John Butterfield, of Columbus, Ohio, formerly of Lowell in this State. Dr. B. was editor of the Ohio Medical and Surgical Journal, the publication of which was commenced at Columbus in July of last year, and in the management of the work he exhibited a combination of the peculiar talents required for such an office. Indeed, we have not known a medical periodical commence under more flattering auspices than his. In the last number, referring to the first volume, which was just

completed, he alludes to the disease then preying upon his system, and which was soon to disappoint the hope that, in common with consumptive patients in general, he was so ready to cherish. "Many of our articles," he says, "like the present one, have been written while suffering under bodily pain and infirmity. We have hardly been able to do justice to ourself, but we *hope* all the while for better times."—Nearer home, we have to record the death of Dr. Jos. Stone, of Hardwick, Worcester Co., Mass., a gentleman who had not only attained a high rank in his neighborhood as a physician, but who had filled high civil offices with credit to himself and benefit to his constituents.

Besides these, a large number of excellent practitioners, less known to the world at large, but of no less value to the communities with which they were connected, have gone down to the grave.

Dr. Brigham was an author whose opinions carried weight with them while he was living; and although now dead, yet through the volumes that he prepared in the course of intervals of leisure—a system of economy which no physician should neglect—he will exert an influence over other minds, and contribute to the onward progress of human happiness through ages yet to come. It is this opportunity of doing good, that should be encouraged, since the tomb opposes no barrier to the teachings of a man who has improved the talents God has given him, and recorded the results of his own observations and impressions in the sphere Providence has allotted him. It is a prominent and reprehensible fault in the character of American physicians, that they are too much in a hurry to be of service to posterity. The great lights are very few in number, compared to the whole mass who might and should contribute to the general stock of medical information, which is constantly accumulating, but too often not garnered. By habitually noting down, at spare moments, the mere anomalies that fall under one's eye from day to day, a surprising number of facts is collected before the individual is aware of it. Next, the manuscript becomes an essential book of reference, and years give to it additional consequence. If our medical friends could be persuaded to establish the habit of writing more—and the sudden removal by death of so many of our profession should induce them to do so at once—the annals of the United States, in all its future history, would have a brilliant page, commemorative of the literary and scientific services of those who upheld the dignity and reputation of the medical profession.

Appreciation of Surgical Skill.—It will be remembered, that Dr. Folsom, of New Bedford, Mass., was on board the cars which came in collision on the 2d of August, near Princeton, N. J., by which a large number of persons were killed, and a still larger number severely wounded, and that he rendered the most important services on the occasion. The doctor has since received, from the Directors, a case of the most choice, complete and beautiful surgical instruments, embracing fifty-two pieces, and valued at two hundred dollars, with a suitable inscription upon a silver plate, accompanied by a letter from the Secretary enclosing the resolutions of the Board, which we copy below, together with Dr. F.'s reply to the Secretary.

Princeton, N. J., August 29th, 1849.

SIR,—It affords me great pleasure to be the means of communicating to you the enclosed resolutions of the Board of Directors of the Delaware and Raritan Canal and Camden and Amboy Rail Road and Transporta-

tion Company; and at the same time to forward to you a box of surgical instruments, which they beg you to receive as an acknowledgment of, and tribute to, the disinterested humanity and professional skill alike displayed by you on the 2d day of August instant, on the occasion of the melancholy accident which occurred on the Rail Road near the Princeton station on that day.

With sincere wishes for your prosperity, I beg leave to subscribe myself,

Your ob't, JOHN R. THOMPSON, *Sec'y of the R. Road.*

Dr. L. Folsom, New Bedford, Mass.

"The prompt and efficient aid rendered by Dr. Folsom, of New Bedford, to the unfortunate individuals injured by the accident of the 2d inst., was stated to the Board; whereupon the following resolutions were unanimously adopted:—

"*Resolved*, That the thanks of this Board be tendered to Dr. Folsom, of New Bedford, for his prompt, humane and valuable services to the unfortunate individuals who were injured by that disaster; and that a case of surgical instruments be presented to him as a token of the grateful feelings of the Board, and of the appreciation of his services."

New Bedford, Sept. 8th, 1849.

DEAR SIR,—I have the honor to acknowledge the receipt of your favor of the 29th August, enclosing a copy of the resolutions adopted by the Directors of the Camden and Amboy Rail Road Company, approving some service rendered by me on the occasion of the sad disaster near Princeton. I received, at the same time, the box of surgical instruments, which was voted by the Board.

This to me, Sir, is a most unexpected and most gratifying testimonial to the imperfect services rendered by me on that occasion. They were given freely, and without a thought of acquiring honor or reward, and it has ever been to me a source of high satisfaction that I was enabled to alleviate the sufferings of my fellow passengers.

Be pleased to convey to the Board my thanks for their kind expressions of regard, as well as for their splendid gift, and believe me

Your obliged and ob't serv't, LEVI FOLSOM.

John R. Thompson, Esq., Sec'y Rail Road.

Life Insurance and Health Offices.—A perpetual series of frauds appear to have been practised on the Health Insurance Offices, which finally broke several of them down. If an unprincipled person chose to represent that he was too unwell to pursue his daily avocation, the office had no other course than to pay the policy. Such persons invariably took the precaution to call in a physician once at least, and then would most heroically wait, week in and week out, for its effects! A strange class of patients suddenly came into existence, with the chartering of those institutions. Singular as it may appear, they suddenly recovered from long protracted, undefined, irremediable diseases, when the insurance offices failed.

Life Insurances are of a very different order. There is stability in them, and the expectations of those confiding in them are fully realized by surviving friends. A striking instance of their exceeding utility, occurred the other day in Boston. The Rev. A. J. Brown, a city missionary, took out a policy on his life at the American Mutual, of which O. Brewster, No. 4 State street, is actuary. Only a small amount, a single payment, had been

made, but it secured to his otherwise destitute little ones the comfortable sum of one thousand dollars—which was promptly paid to them.

Scientific Merit acknowledged.—Last week a general notice was taken of the valuable scientific researches of Professor Horsford, in regard to the poisonous effects of lead, as service pipes, through which potable water is conducted to the interior of houses in this and other cities. Although the preparation of the report to which we alluded, must have occupied the author considerable time, over and above the labor of experimenting in his laboratory for nearly one whole year, he made no charge whatever, and freely presented the citizens of Boston the important results of these extended series of inquiries. It is gratifying to know that Professor H. has been presented, by the city authorities, with a service of plate, as a partial acknowledgment of the value of his services.

Dr. Lawson's Valedictory.—At the close of the last term in the Medical College of Ohio, the Professor of Therapeutics and General Pathology, Dr. L. M. Lawson, delivered a parting address, which was precisely adapted to the place and the audience, in which he recounts the arduous struggles of the pupil, and adverts to the freedom that is realized when the elements of prescribed studies have been mastered, and the mind has a wider range of action. In a happy manner, the Professor exhibits a chart of the course the young gentlemen ought to pursue on leaving the institution, and fairly warns them of the hardships they may encounter in the march of professional life. In a faithful, yet paternal manner, he explains the true method of cultivating medical science, without being shackled or embarrassed by systems or dogmas. Finally, the road which has been explored for them by those already eminently distinguished for their brilliancy and influence, is shown them so clearly, that those who heard him cannot miss the way unless it is wilfully done. The author would have no excuse, had he produced a stupid discourse, since his experience as a ready writer, as evinced in the editorial management of the *Western Lancet*, has given him facility and tact. The class honored themselves when they complimented Dr. Lawson by publishing this pleasant, encouraging and truthful dissertation on the rise, progress and character of a good physician.

Revival of Mesmerism.—Notwithstanding the universal contempt into which those who practised animal magnetism have fallen, here and everywhere else, owing in part to the gross dishonesty and imposture of a troop of migratory professors of this modernized black art, who overran the land with their low impositions, an attempt is making in Calcutta to resuscitate mesmerism on a large scale. A Dr. Esdaile has succeeded in dusting the eyes of East India philanthropists to a wonderful extent. Here is a public call.

"Those who are desirous of seeing the Mesmeric Hospital restored, are informed that a subscription book is lying on our table, and that the smallest donations will be thankfully received. The great benefit conferred on numbers of the suffering poor by the late institution, leads us to hope that many will be found willing to contribute a trifle to the charity, and those also who really wish for a thorough investigation of a very

curious subject will, we have no doubt, aid the inquiry by a trifling donation. The whole sum required is small, and the opportunity should not be lost of securing the services of one so zealous, and who has had so much practical experience as Dr. Esdaile."

Preservation of the Hair.—It seems, according to the title-page of a pamphlet from the press of Wm. Chadwick, of this city, that M. Jacoby delivered a lecture, on the *Treatment and Preservation of the Hair*, at the Masonic Temple, which has been published by request. Those who flattered the author by making this request, might have saved themselves the trouble, by turning to any modern treatise on anatomy and physiology, where they would have found all there is here, and more too, of a higher and better quality. It is presumed, however, that this lecture upon the theory of bald heads, wigs, top-pieces, bear's grease, &c., has a slight reference to selling some new compound, practising some process, raising a crop of customers for a barber's shop in Franklin street, and ultimately bettering the condition and filling the pocket of the proprietor and lecturer.

Subsidence of the Cholera in Boston.—It will be seen that, in our weekly report of to-day, the number of deaths by cholera is much smaller than in the previous report. Most of these occurred in the first part of the week, and probably a few of them previous to the closing of the former report, but not returned to the registrar in season to be included in it. We may therefore consider the city at present as nearly or quite free from the disease. It is intended to make out for the Journal a full report of the number of deaths by the epidemic, so far as they have been reported, embracing the age and birth-place of the patients, with such other information as can be obtained. We should be pleased to receive from any of the cholera physicians of the city, or other physicians who have had cases under their care, any account of their *treatment* of the disease which may be thought interesting to the profession, or useful as a future reference.—In the present report, 5 of the deaths were at the House of Industry, 13 at Deer Island Hospital, 9 at the Cholera Hospital, and 3 at the Lunatic Asylum. Americans, 51; foreigners, or children of foreigners, 109.

A Medical Hero.—Joseph Mazzini, one of the Roman Triumvirate, was born in Genoa in 1809, and educated a physician. The regeneration of his country has been his dream from youth. Early exiled on account of his liberal opinions, he went to Marseilles, and published a liberal paper for circulation in Italy, was obliged to fly, and escaped to Switzerland. There he organized an expedition to Savoy, which was led by Romarino, and failed. He was driven out of Switzerland, fled to England, distinguished himself there by his writings, his general benevolence, and his love of liberty. He went to Paris during the revolution, and thence to Milan, where the people wished to make him dictator and resist the Austrians when at their gates. But it was too late. He again took refuge in Switzerland, from whence he departed for Leghorn, where he was elected a deputy to the Constituent Assembly. From thence he proceeded to Rome, where he has occupied a position of great eminence. He was much admired and beloved by the English, and is celebrated for his eloquence.

Saratoga Medical Society.—At the annual meeting of this Society, held at Saratoga Springs, on Tuesday, July 31st, 1849, the following officers were elected for the ensuing year:—Dr. H. Baxter, *President*; Dr. H. Reynolds, *Vice President*; Dr. T. B. Reynolds, *Secretary and Treasurer*; Drs. O. Brisbin, R. L. Allen, A. J. Chadsey, T. B. Reynolds, and E. St. John, were elected *Censors*; and Drs. R. L. Allen, A. J. Chadsey, Oliver Brisbin, E. St. John, and James Lee, *Delegates* to the National Medical Association, at the meeting to be held next year at Cincinnati.—*Med. News.*

Medical Miscellany.—The cost of drugs, medicines, instruments, &c., for the pauper establishment at South Boston, the last year, was \$2,529 27.—A firm in New York say that they have received a specimen of reputed cod-liver oil from Boston, that does not contain a particle of that article!—It is asserted, on the authority of Mr. Fairchild, that seven hundred drunkards die annually in the sober state of Connecticut.—In Great Britain, it is estimated by the commissioners on drunkenness, that the value of labor lost through intemperance, is not far from \$200,000,000, annually.—Dr. Palmer, a convict, sentenced at New Orleans to two years imprisonment in the Louisiana Penitentiary at Baton Rouge, hung himself in his cell on the morning of the 23d. He tore his shirt in strips and fastened them round his neck and to the bars of his cell, and thus was found suspended when his cell was opened in the morning.—Cholera is subsiding throughout the country, but dysentery is still exceedingly prevalent, and physicians have been very much baffled in treating it successfully.—A notorious medical quack, calling himself Dr. Dow, but whose real name is John H. Josselyn, keeping an office at No. 11 Wilson's lane, in this city, has been unmasked. A brother of his having attempted to pass a counterfeit \$10 bill, suspicion was created, and police officers were sent and searched the office, where they found other counterfeit bills and counterfeiting apparatus, as well as burglarious tools, &c. Dr. Dow himself is not to be found.—A cast-iron leg is said to have been invented in Philadelphia, by a Mr. Yeager, weighing only 2 pounds 11 ounces, and having all the motions of the joints secured in an ingenious and skilful manner.—At a late meeting of the Medical Society of the State of Pennsylvania, resolutions were adopted in favor of a law for the registration of births, marriages and deaths.

MARRIED.—Dr. Hardenbrook, of Rochester, N. Y., to Mrs. Nott. He has been tried and acquitted of poisoning her husband.—Dr. Albert White, of South Weymouth, Mass., to Miss E. A. Harding.—In Boston, Horace Thurston, M.D., to Miss C. L. Quimby.

DIED.—At Queechy Village, Vermont, Theodore Dexter, M.D., of Boston, 58. He was on a tour for the restoration of his health.—At Salisbury, N. H., Dr. John Butterfield, Professor of the Practice of Medicine in the Starling Medical College, Columbus, Ohio, and editor of the Ohio Medical and Surgical Journal.—At Burut Corn, Alabama, Dr. George A. Wattle, by suicide, a native of New York.

Report of Deaths in Boston—for the week ending Saturday, September 15th, 106.—Males, 86—females, 74. Of cholera, 44—dysentery, 21—consumption, 10—diarrhoea, 3—disease of the bowels, 21—teething, 9—typhoid fever, 1—typhus fever, 4—scarlet fever, 1—marasmus, 2—dropsy, 2—cholera infantum, 6—infantile, 10—congestion of the brain, 1—old age, 4—pleurisy, 2—measles, 1—disease of the brain, 3—unknown, 3—brain fever, 1—inflammation of the lungs, 4—scalded, 1—inflammation of the stomach, 1—child-bed, 1—canker, 1—suicide by arsenic, 1—disease of the liver, 1.

Under 5 years, 65—between 5 and 20 years, 20—between 20 and 40 years, 46—between 40 and 60 years, 19—over 60 years, 10.

Renunciation of Homœopathy in the treatment of Cholera, by Dr. F. F. Quin, President of the British Homœopathic Society.—The present emergency has called forth the following complete, though unobtrusive recantation of infinitesimal trifling with cholera. Dr. Quin recommends camphor in heroic doses. He trembles to trust to the inert attenuations—the ostensible *materia medica*—of his system. He is too sly to state explicitly that homœopathy is a delusion, and that people treated by homœopathic remedies, in homœopathic doses, are not treated at all. Being, however, somewhat reluctant to assist in enlarging the catalogue of homœopathic catastrophes, he makes a compromise with his conscience, and recommends what, we have no hesitation in saying, is one of the very best, and, we believe, the most common method, among regular physicians, of treating choleraic spasm. That there may be no misunderstanding, or alleged misrepresentation, we quote the passages which contain his views on this remedy.

"If the above symptoms" (premonitory diarrhœa, etc.) "are accompanied or succeeded by cramps in the bowels or in the limbs, with or without rigors, sensation of cold, rigidity of the muscles, and vomiting, which is a constant but not an invariable symptom, then the concentrated spirit of *camphor* should at once be given. My preparation of this remedy is *one* drachm of camphor to *six* drachms of alcohol. Two drops every four or five minutes on a small piece of sugar, till profuse perspiration sets in, and the cramps, vomiting, and diarrhœa diminish; as the symptoms diminish in intensity, the intervals between the doses to be lengthened to every ten, fifteen, and thirty minutes, to every hour, two hours, and so on, till at last the remedy be only given twice or even once a day." Again, in another part of his paper, Dr. Quin recommends families and medical men to keep at hand several homœopathic remedies (which he mentions), "and especially the spirit of camphor, which is the easiest of administration, and the most efficacious in the onset of the disease. It even may be of great service in the case of those who would not submit to comply with other parts of the homœopathic treatment. In fact, camphor is a remedy which allopathic practitioners may use with the greatest advantage. He will in many cases find no other remedy required. If a homœopathic practitioner be called in to a case that has been so far treated allopathically, he should begin with four or five drops of *camphor*, to be given every four or five minutes, at least several times, to re-animate the system depressed by disease, and to neutralize the action of the medicines previously taken; and then proceed to *veratrum*, *capsicum*, etc., according to the indications. The same instruction applies to the allopathic practitioner, who, from a sense of the failure of his own usual resources, may be willing to make trial of the homœopathic remedies." (*The Homœopathic Times*, No. 1, August 4, 1849.) There is no end to the great discoveries of the homœopaths. Camphor in large doses (we must henceforth remember) "neutralizes the action of medicines previously taken"; it is therefore, we presume, to be used as a universal antidote in poisoning.—*London Journal of Medicine*.

Pennsylvania Hospital.—Dr. C. D. Meigs has resigned the post of Physician to the Lying-in Department in this Institution, and Dr. Joseph Carson has been elected in his stead. Dr. Carson brings to the appointment a large fund of experience, having been long and successfully engaged in this branch of his profession. We rejoice that the loss of Dr. Meigs's valuable services has been so well met in the election of his successor.—*Medical Examiner*.